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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	920976.90199
	First Named Inventor	Barbara R. Evans
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	Filed Herewith
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Metallization of Bacterial Cellulose for Electrical and Electronic Device Manufacture

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.


Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label		26710		OR <input type="checkbox"/> Correspondence address below	
Name					
					
Address					
26710					
PATENT-TRADEMARK OFFICE					
City		State		ZIP	
Country		Telephone		Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Barbara R.			Evans		
Inventor's Signature <i>Barbara R Evans</i>				Date <i>12/10/2001</i>	
Residence: City		State		Country	
Oak Ridge		TN		US	
Mailing Address					
103 Outer Drive					
Mailing Address					
City		State		Country	
Oak Ridge		TN		US	
ZIP		37830			
NAME OF SECOND INVENTOR:					
<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname		
Hugh M.			O'Neill		
Inventor's Signature <i>Hugh M O'Neill</i>				Date <i>12-10-01</i>	
Residence: City		State		Country	
Knoxville		TN		US	
Mailing Address					
8631 Gleason Drive					
Mailing Address					
City		State		Country	
Knoxville		TN		US	
ZIP		37923			
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>2</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (11-00)
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Valerie Malyvanh

Jansen

Inventor's
Signature

Valerie Malyvanh Jansen

Date 12/11/01

Residence: City Memphis

State TN

Country US

Citizenship US

Mailing Address 4955 Hidden Lake Drive #102

Mailing Address

City Memphis

State TN

ZIP 38128

Country US

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

~~Jonathan~~

~~Woodward~~

Inventor's
Signature

Date

Residence: City ~~Knoxville~~

State ~~TN~~

Country ~~US~~

Citizenship ~~US~~

Mailing Address ~~8700 Hopemont Way~~

Mailing Address ~~Apt. 804~~

City ~~Knoxville~~

State ~~TN~~

ZIP ~~37020~~

Country ~~US~~

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

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City

State

ZIP

Country

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Valerie P.		Mary Vantr	
Inventor's Signature		Date	
Residence: City Nashville	State TN	Country US	Citizenship US
Mailing Address 400 Adamwood Drive Po			
Mailing Address			
City Nashville	State TN	ZIP 37211	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Jonathan		Woodward	
Inventor's Signature <i>Jonathan Woodward</i>		Date <i>12/10/01</i>	
Residence: City Knoxville	State TN	Country US	Citizenship US
Mailing Address 8706 Hopewell Way <i>7734 ESTER WAY gn</i>			
Mailing Address Apr 301 gn			
City Knoxville	State TN	ZIP 37923 <i>37909 gn</i>	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	
Filing Date	Filed Herewith
First Named Inventor	Barbara R. Evans
Title	Metallization of Bacterial Cellulos
Group Art Unit	
Examiner Name	
Attorney Docket Number	920976.90199

I hereby appoint:

☒ Practitioners at Customer Number 24298 →

OR

☐ Practitioner(s) named below:

Place Customer Bar Code Label here

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☐ Firm or
Individual Name

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City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Barbara R. Evans
Signature	<i>Barbara R. Evans</i>
Date	12/10/2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 4 forms are submitted.

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	Hugh M. O'Neill
Signature	<i>Hugh M. O'Neill</i>
Date	12-10-01

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.

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SIGNATURE of Applicant or Assignee of Record

Name	Valerie Malyvanh Jansen
Signature	<i>Valerie Malyvanh Jansen</i>
Date	12/11/01

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	Jonathan Woodward
Signature	<i>Jonathan Woodward</i>
Date	12/10/01

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